



# Morning Care/Afternoon Care

## Registration form 2022-2023

Child/Children's Name and Grade:

Name	Grade	Name	Grade
_____	_____	_____	_____
_____	_____	_____	_____

**Please choose when will you be using Morning Care/Afternoon Care services:**

\_\_\_\_\_ Morning Care Only (monthly) 6:45am-7:45am (minimum 10 students registered)

\_\_\_\_\_ Morning Care & Extended Day (monthly) 6:45am-7:45am & 3:10pm-6:00pm

\_\_\_\_\_ Afternoon Care Only (monthly/5 days a week) 3:10pm-6:00pm

\_\_\_\_\_ Afternoon Care Only 4 Days per week circle what days: M T W Th F

\_\_\_\_\_ Afternoon Care Only 3 Days per week circle what days: M T W Th F

\_\_\_\_\_ Afternoon Care Only 2 Days per week circle what days: M T W Th F

\_\_\_\_\_ Afternoon Care Only 1 Day per week circle what day: M T W Th F

\_\_\_\_\_ Drop in (as needed basis) at \$12/hour

**I have read the Morning Care and Afternoon Care information and agree to pay the amount charged.**

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

Cell Number: \_\_\_\_\_ (mom)

Cell Number: \_\_\_\_\_ (dad)